

From the Other Side

LaFarge's Dr. DeLine sends letter to the community

Dear patients and friends:

As most of you know, I've recently been diagnosed with prostate cancer. I decided early on that I was most comfortable sharing my experience with our community. After all, many of you have shared your concerns, fears, and symptoms with me for nearly 25 years (can it really have been so long?). Each of us knows that our turn must come for illness and eventually death. Denial and a sense of invincibility is nearly universal. It's most evident in our teenagers. I think denial is a wonderful defense mechanism as long as it doesn't interfere with us accessing proper medical care with standard screening tests and evaluation of significant symptoms and taking good care of ourselves. Beyond that, living each day without undue concern about future health issues that may or may not occur allows us to live life fully and without undue anxiety.

Since my bubble of invincibility was burst, only about two weeks ago, I've given considerable thought to my options for treatment and my plans after treatment. I anticipate gaining new and fresh perspectives on what it's like to be the patient, the view from the other side. I thought it might be interesting for you, my community, to hear from me as the experience unfolds. I'm guessing that this series of articles will be short- a few weeks- with preparations, treatment, recovery, back to work. (There's that invincibility taking over again!)

Notes from the other side- Part I

It started with an awareness of my bladder. I knew it was there- we learned about that in anatomy class. But I never felt my bladder, any more than I did my liver or my lungs. But there it was- a sensation of bladder. No discomfort. After urinating, it was still there. And in a little while I needed to urinate again! We have a term for that- prostatism. That telltale sign nearly universal for us males in the second half of our life. But how could that be me, at age 47? Well, that was

five years ago. Gone are the days of writing our names in the snow, that age-old pleasure of young boys.

After a couple of years of that, I made that decision, so difficult for us middle-aged males. I decided to get a checkup. Ann had been encouraging me for years. I knew better, of course. "No necessary screening tests for male under age 50...." I had a physical before entering medical school in 1976 (mandatory). Over the next 25 years I had seen a doctor two or three times. Blood tests, including PSA, and a physical at age 49. "Do you have this, do you have that?" "No, no, no.... Just incomplete bladder emptying and heartburn." "How often do you have heartburn?" "Every day, every night." "Do you take anything- Zantax, Pepcid?" "No- a little Maalox sometimes." "You should take something. Return in one year."

Two years later when I returned, that same story. Up once or twice a night to urinate, heartburn every day. I felt fine, PSA still normal. "You should take something for the heartburn. You should have a colonoscopy. And come back in one year." Whatever, these doctors are a neurotic lot.

When I returned in the fall of 2005, the story was the same, but this time I was a little nervous. My PSA was starting to rise. I had had three years of urinary symptoms. My father had had a radical prostatectomy for prostate cancer at age 58. The doctor reassured me. "But how about that colonoscopy?" "I haven't had one." "How about your heartburn?" "I don't take anything." "Well, maybe you should have your esophagus checked with a scope (upper endoscopy)." "Alright, I'll take something for heartburn." So I took a pill for heartburn. Amazing- after 25 years of heartburn, it went away! And before my scheduled 2006 checkup, (just before), I had the colonoscopy. Normal. However, my PSA was still rising. I'd been thinking about prostate cancer for several years already. I knew I needed to be biopsied.

To be continued

Richland 1 junior team places at Holstein Convention quiz

The 2007 Wisconsin Junior Holstein Convention was held Jan. 5-7, 2007, at Fond du Lac.

Approximately 550 juniors and chaperones arrived on Friday for educational dairy experiences, meeting other kids with the same interests and having some fun.

Richland County took three dairy quiz bowl teams. Two junior teams and one senior team. The dairy quiz bowl competition covers feeds & feeding, nutrition, herd health, milking profitability, calf care, WHA history and general agricultural statistics. The quiz consists of two phases.

Phase one is 12 questions directed individually to the team members. Phase two is 16 toss up questions that are awarded to whichever team member buzzes in first. This phase is worth 15 points for every correct answer a minus 10 points for each incorrect answer.

The senior team consisted of captain, Brad Solchenberger, son of John and Margo Solchenberger of Cazenovia; and team members Shi Lurvey, daughter of Tom and Mar Lurvey, Lone Rock; Krysty Kepler daughter of Lonnie and Dana Kepler of Viola, and Tyler Moore, son of Neal and Amy Moore, Lone Rock.

The seniors competed on Saturday and completed five rounds of play. Our Richland 1 junior team consisted of captain Josh Joseph, son of Jeff and Gloria Joseph of Viola, and team members Devin Kepler, son of Lonnie and Dana Kepler of Viola; Heidi Solchenberger, daughter of John and Margo Solchenberger of Cazenovia; and Scott Eberle son of Kevin and Janeen Eberle of Lone Rock.

The Richland 1 team competed on Friday and completed five rounds of play and ended up third of 40 teams resulting in much excitement.

Our second junior team, Richland 2 consisted of captain Cody Jump, son of Jeff and Connie Jump of Richland Center, and team members Julie Eberle, daughter of Kevin and Janeen Eberle of Lone Rock; Sierra Lurvey, daughter of Tom and Mary Lurvey of Lone Rock; Jacob Joseph, son of Jeff and Gloria Joseph of Viola, and Jeremy Moore, son of Neal and Amy Moore of Lone Rock. This team completed three rounds of play and met all of their objectives for the competition resulting in personal success for the



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From the Other Side

LaFarge's Dr. DeLine sends letter to the community

Part II

When I saw that PSA, I thought, "I have prostate cancer. What will I do now?"

About two years ago, I had read an article about "robot assisted prostatectomy," a brand new, less invasive procedure for prostate cancer. It had been on my mind since then.

While watchful waiting or radiation therapy might be appropriate for an older man, I knew most middle-aged men with prostate cancer die of their disease if not cured by surgery. This is not true for older men. So I knew that if my biopsies showed cancer, I would have a radical prostatectomy.

I did a literature review and found that robot-assisted prostatectomy is being done at more and more places and is rapidly gaining favor. Clearly, the side effects of surgery are less (less bleeding, less hospital time, faster recovery, and less incontinence and loss of sexual function).

Of course, cure rates following the new surgery are less certain. The first procedures were done in the year 2000. By 2001, only about 100 procedures were done in the world (90 percent at Henry Ford Hospital in Detroit). Since then the procedure has been done more and more frequently and centers are opening all across the country including at University Hospital, Mayo Clinic, Lutheran Hospital,

and Marshfield Clinic.

Cure rates following prostate cancer surgery are usually measured at 5-, 10-, 15-, and 20-year intervals. For this procedure, only a few years of follow-up are available. So far, the survival curves are superimposable. My decision was made. If my biopsies were positive, I would have the new robotic procedure. I would accept greater uncertainty about long-term outcome for a less invasive procedure with less side effects (would I be able to jog again?).

As I studied the procedure, it was evident that the Henry Ford Hospital had much more experience than anywhere in the world. Since the procedure is new and technically demanding, I decided to go to an institution with extensive experience- the Henry Ford Hospital. They've now done several thousand of these procedures and use the procedure for nearly all patients that are treated surgically.

My belief is that in the next two to three years the robotic procedure will replace the standard open procedure, and most local programs will have enough experience to do it well. My father was in the hospital for seven days after his surgery... I would be discharged the day after my surgery (though with a urinary catheter for a week).

To be continued

Radon test kits available at Vernon County Health Dept.

Radon is a radioactive gas that comes from the natural decay of uranium, which is found in nearly all soils. Radon typically moves up through the ground to the air above and gets into homes through cracks and other holes in the foundation. The radon gas can be trapped inside the home where it can build up. Any home can have a radon problem--new homes, old homes, homes with or without a basement, drafty homes, and well-sealed homes.

The surgeon general has warned that radon is the second leading cause of lung cancer in the United States, second only to smoking.

Past testing in southwest Wisconsin has shown that up to 30 percent of homes have elevated radon levels. Testing is the only way to know what the radon level is in your home.

Test kits are available free of charge through the Vernon County Health Department, E7410 CTH BB, Viroqua, WI.

Making repairs to eliminate radon gas can be simple and affordable. A typical radon problem can be solved for less than \$1,000. The radon remediation industry is well regulated and finding competent assistance should be easy. Call the Vernon County Health Department to locate qualified contractors in your area.

For more information, call the Vernon County Health Department at (608) 637-5251 or toll free at 1-888-low-radon.

Viola Food Pantry notice

Food for families in need will be available this Saturday, Jan. 27, at the Viola United Methodist Church, from 10 a.m. to noon.

Anyone within the boundaries of

LAWTON LIBRARY LOOKOUT

RITA WACHUTA, LIBRARIAN

Friends of the Library hosting open house

Page Turners is currently reading Allegra Goodman's *Intuition*, which was on the Best Sellers list for several weeks. This novel about science and politics will be discussed on Wednesday, Feb. 7, at 6:30 p.m. at the library. Copies are once again available at the library.

Telecirc, a service from the LaCrosse Library, is now in effect for Lawton Memorial Library patrons. Library users will be receiving phone calls to noti-

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Part III

Trying to get an appointment for myself was interesting.

After the interminable artificial voice prompts, I got a human on the line. "I would like to talk to a doctor specializing in robotic surgery for prostate cancer. I need to discuss a patient to be referred to your center." "I'm sorry, but I can't get a doctor to speak with you but I can get an appointment. What's the patient's name?" "Well, ah...could I just talk to the doctor?" I wanted to be sure that I could get a consultation; then if I needed biopsy, have it done on the same trip. We went back and forth, and I couldn't seem to speak to anyone beyond the telephone answerer.

A day or two later I tried again. This time after some discussion and several transfers I reached Arleeta, the urology "patient advocate." I said, "Well, actually, the patient is me," somewhat sheepishly. Thank God for Arleeta! She knew the scoop— what needed to be done for me to have a prostate biopsy. She arranged for us to stay overnight in an apartment next to the hospital— took care of everything. I asked Arleeta at one point, "Will I get to talk to the urologist in addition to the biopsy?" She replied, "Of course, I wouldn't do that to you! You'll have time for a consultation as well."

Now I had a week or two to wait. I wondered whether the biopsy would be like my father had described in a way only he could. "It's like getting kicked in the ass by a horse." Great. I wasn't worried MUCH! When my paperwork arrived, I had two appointment cards, one for urology consultation, the other for prostate biopsy, both at 2 p.m. I thought that was a little odd.

The urologist was running late. The nurse made me "comfortable." When the urologist arrived, I was lying naked from the waist down and on my left side. I asked, "Will I get to ask you a few questions?" He replied, "Of course, I'll be working here for a little while— ask me anything you like." Some consultation. The biopsy really

wasn't that bad. A little like a cap gun in the rectum— bang, bang,... Six times on the left, six times on the right. Very little discomfort though. I did get my three questions answered, rather briefly. What did I expect? He was a surgeon after all, and a plumber at that; action oriented— not too inclined to a lot of discussion. I know a little about surgeons, so I wasn't surprised or disappointed (just a little amused). The urologist thought the right side of the prostate felt a little irregular, but the ultrasound test, done before the biopsies, looked normal to him.

We returned home Dec. 23 to the children's arrival for Christmas break. Then our little "dumpling" Alejandra arrived on the 27th. That's when we enjoyed our Christmas! Back to work and busy. I began to think how silly it was to go through all that fuss— biopsies, going to Detroit. Probably everything is normal.

I called one week later to get the biopsy results. Arleeta said that she couldn't give me the results— that had to come from the doctor. I thought that was a little strange. A short while later the urologist called back. "I'm sorry to tell you, but three out of six biopsies on the right were positive for cancer." Even though I was suspecting that, still it was surprising when I was actually told I had prostate cancer. I was in the middle of seeing patients— Friday afternoon— and went ahead and finished up. I felt calm, confident, and pleased that I had gone through the bother of testing.

The next step was clear. I called Arleeta back to set up my appointment with the surgeon. It was a different urologist. He does exclusively surgery (prostate and kidney cancer)— doesn't even do prostate biopsies. I asked whether this surgeon was experienced in this procedure. "Experienced," she replied. "He's THE man." It turns out that he's the originator of the technique and has done over 2,000 robot-assisted prostatectomies.

To be continued

the card as a little girl in the 1920s. Additionally, a collection of vintage candy boxes, dating from the 1920s-40s, is on loan from Julie Roberts. A collection of letters written by Henry Sime to his young bride, Lottie, during World War II and a true Readstown love story from 1910 make interesting reading.

The Valentine exhibit will remain in place through the month of February. Stop in and see how many of the "courting couples" you can correctly identify. If you have a photo of a courting couple that you wish to

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contribute, you may museum or you may the RAHS members.

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150 YEARS — The Viroqua Masonic Lodge #84 b installation of its officers. Family, friends, and gue From left to right, Brian Ewing- senior steward, Joh district deputy, William Krueger- senior warden, N worshipful master, Larry Stegal- senior deacon, S deacon, Bryon Lawrence- chaplain, Marlowe Nels Eklov- tiler, Jerry Matson- secretary/treasurer. (Co

Notice of Kindergarten Screening Kickapoo Area School

Kickapoo Area Schools will be having Kindergarten screening on Thursday, February 9, 2007. If you have a child three years old or older by June 1, 2007, please call the school at 627-0107 for an appointment.

Reflection

An ongoing problem in Denver and other cities in the West. The population of Las Vegas was 30. The remote desert community was inhabited by only a handful of ranchers and their families. At that time, insulin, and antibiotics had not been discovered yet. Scotch tape, crossword puzzles, beer, and iced tea hadn't been invented. There was no Mother's Day or Father's Day. In 10 U.S. adults couldn't read or write. Only 6 percent of all Americans had graduated from high school. Marijuana, heroin, and morphine were all available over the counter at drugstores. According to one racist, "Heroin clears the complexion, gives buoyancy to the system, regulates the stomach and the bowels, and is, in fact, a perfect means of health." Coca-Cola contained cocaine and caffeine. Punch card data processing had not yet been developed, and early computers were used for the first time by the government to help compile the 1900 census. 8 percent of households in the country had at least one full-time servant.

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Part IV

During our first trip to Detroit for the biopsy, we were greeted at nearly every turn by African-Americans, from cab drivers to receptionists (including my special helper Arleeta), to nurses, as well as the doctor who did my prostate biopsy. A diverse and complete African-American middle class, friendly and reassuring at every turn to us "country bumpkins." We didn't know quite how to respond to being fussed over so. The cab driver was aghast when he opened the door for Ann and she slipped in, then quickly hopped over the center section to sit on the opposite side. He had planned, of course, to go to that side and open the door for me. I was a little stiff, there for my medical procedure and all, while Ann was engaging and friendly and quickly enamored herself to all. By the end of each interaction, we heard all about their families, dreams, and aspirations, encouraged by Ann's questions and interest in them. On several occasions, big hugs were dished out to Ann (to me secondarily!) with wishes for good luck to us. We just seemed surrounded by love and concern, precipitated mostly by Ann's curiosity and warmth toward them.

Our trip on Jan. 10 had been for consultation with the surgeon and his team. The consult was at the "corpo-

rate headquarters" of Vattikuti Institute for Prostate Surgery (VIP) and was about eight blocks from the hospital. The consultation suite was elegant with a huge fish tank and expensive furniture. We were greeted in the lobby by the "concierge" who escorted us to the waiting room. There were several other couples who seemed more accustomed to being waited on, tense-looking men with their distressed-looking wives. One of the men (a doctor, I believe) asked to see "the facilities." I assumed the surgical suite where the surgery was performed. We were in awe of the surrounding, the efficiency, the obvious wealth. The team included members with titles like "VIP Team Manager, Patient Advocate, VIP Concierge, and VIP Liaison, in addition to the more expected nurse, PA, and doctors. The VIP liaison, as she escorted us back to the lobby, gave us her card and cell phone number and insisted we call her "24-7" for any concerns! She wanted to call us a cab—couldn't believe we were walking back to the apartment.

Clearly, most of their "clients" get their exercise by working out in clubs, not by walking on the street. I wonder what they'd pay to be as lucky as us and be able to walk in a place as beautiful as our "Reserve."

To be continued

Your Sweetheart
M. L. L.

From the Other Side- Part V

LaFarge's Dr. DeLine sends letter to the community

Prior to surgery, I had received a DVD showing an example of the procedure performed by a former fellow from Detroit. Just as I've seen so often with removal of the gallbladder laparoscopically, the view through the scope is far superior to that with a standard approach. It was also evident that though the procedure is done through small ports (six in all), it is truly a "radical prostatectomy." The prostate and enclosed urethra (urine tube) is completely removed, cutting across the neck of the bladder. Then the urethra is reconnected to the bladder (sewn over a catheter as support). Much dissection is done, the surgeon directing the robotic arms to carefully free up the tissue here, cut there, cauterize there, to achieve an optimal resection, sparing critical structures so close by.

It occurred to me about two weeks before surgery that if I got a cold, my surgery would be cancelled or delayed, messing up the carefully organized schedule at the clinic, our apartment rental dates, and our personal schedule. I was even busier than usual for two weeks before leaving, multiple middle of the night deliveries in addition to the usual schedule. Realizing that I usually get sick only when sleep deprived, I tried hard to nap after being up through the night. I was particularly careful at the office to minimize my exposures.

By Friday evening, Feb. 4, my office desk was clean (a rare event) and everything arranged at home. We left Saturday on that cold weekend, leaving Mike and our dear Alejandra to "hold down the fort." We stopped on the way to visit Ben and Patrick, then stayed the night in DeKalb, Ill., and visited with our Myra. Sunday, we made the last six hours of the drive to Detroit. What should have been an easy trip was made difficult by lake-effect snow just as we entered Michigan, with blowing snow and poor visibility. We saw about 20 cars off the road. We arrived about 6 p.m. Sunday at our apartment next to the Henry Ford Hospital. I had clear liquids through the day and was just in time for the minor "bowel prep" before surgery.

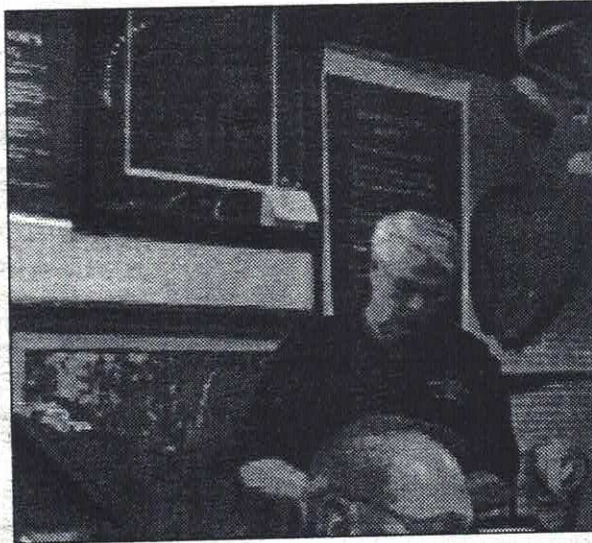
Monday, Feb. 5- surgery day. In spite of my efforts at inner calm, I felt a little nervous. The surgery prep area was like a large city hospital with patients everywhere separated by cur-

liquids, though nothing took away that terrible dryness in my mouth that lasted 24 hours or so. Then the hiccups began. They started around 5 p.m. and continued. At first it wasn't too bad, that rhythmic juggling of the abdomen. As the hours wore on, it made me feel rather miserable. When I mentioned it to staff, they didn't seem too concerned, answering with trite comments like "I used to get hiccups when I was a kid," "have you tried holding your breath?," "how about a teaspoon of sugar?" I thought, "You sound like my mom, not my nurse." Arggh! I didn't have my watch but with my interest in numbers, I thought... once every 8 seconds; that's 7 times per minute, 420 times per hour. No wonder I have more drainage from my drainage site than the other patients- none of whom by the way had hiccups which irritated me more.

By about 8 p.m. we realized Ann hadn't called anyone to let them know that I survived surgery. I encouraged her to leave and come back in the morning. It wasn't necessary for her to stay just to watch me hiccup. I was up walking several times. The nurse had to disconnect my inflation/deflation calk wraps (for prevention of blood clots) and get my catheter and IV lines organized, then I could make my laps on my own.

At 11:30 p.m., the hiccups were ongoing and I was miserable. I realized that my leg hadn't been reconnected after my last walk- that was 1/2 hour ago. Then I heard loud talking in the hallway sounding almost like someone was upset. Then I heard a response and banter back and forth. I realized they were just "jiving" out there. I wasn't pleased. I called for the nurse to reconnect my calf wraps and told her I thought that the loud talk was inappropriate. She left, closing the door. I seethed... suddenly realizing my hiccups were gone. I smiled, rolled to my side, and rested comfortably. After about an hour I had to drink- my mouth felt like a cardboard box. But I had this terrible feeling- if I have one sip, my hiccups will return. Indeed they did. I remembered reading about a man who had hiccups for 28 years. I thought "surely that will be me." I took a sleeping pill and I slept for four hours (as far as I know without hiccups).

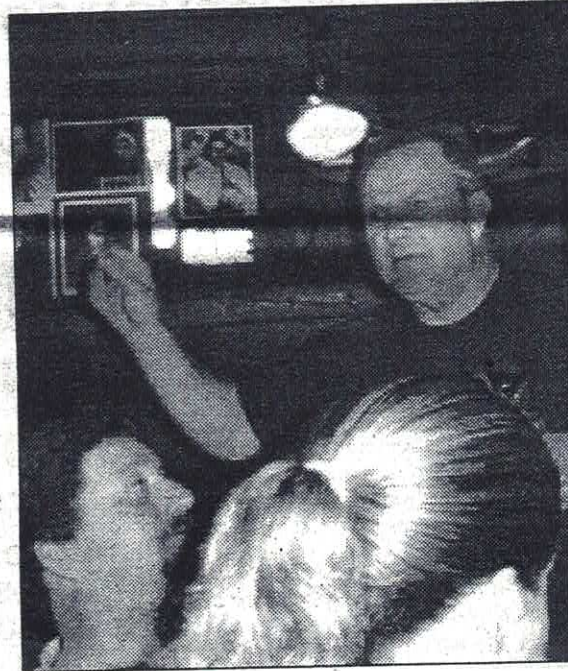
At 4 p.m. they returned. I got up to walk more. Ann returned a little later



NINTH ANNUAL ROCKTON-NWTF BANQUET HELD —

For the ninth year in a row, Rockton Bar has been the place for the annual Rockton Chapter National Wild Turkey Federation Banquet. A short meeting preceded the evening, which was followed by dinner, door prizes, and live auction.

Above, committee members, from left to right, Al Fish, Randy Heisel, and Barry Donovan ready for raffles. At right, regional director Charlie Burke, left, chides with Gene Cary, right, who donated his services as auctioneer. Below, Dean Hamilton and Jodi Myers, far right, ready items for auction. (Bonnie Howell-Sherman photos)



to "hold down the fort." We stopped on the way to visit Ben and Patrick, then stayed the night in DeKalb, Ill., and visited with our Myra. Sunday, we made the last six hours of the drive to Detroit. What should have been an easy trip was made difficult by lake-effect snow just as we entered Michigan, with blowing snow and poor visibility. We saw about 20 cars off the road. We arrived about 6 p.m. Sunday at our apartment next to the Henry Ford Hospital. I had clear liquids through the day and was just in time for the minor "bowel prep" before surgery.

Monday, Feb. 5- surgery day. In spite of my efforts at inner calm, I felt a little nervous. The surgery prep area was like a large city hospital with patients everywhere separated by curtains. Then what seemed like endless waiting. The same questions by different people going from room to room. Two attempts for the successful IV- not bad I thought. More waiting. Shaved from the nipple line down, even the front of the thighs (all quite routine to the worker). I would appreciate the shaving more later when bandages covered most of my abdomen. More waiting. Several times I was told "it'll be around 20 minutes now." Finally, a nice chat with anesthesia. Half of our time was spent discussing my winter jogging. "How do you keep your hands warm?..." Then I remember them saying "breathe in this oxygen." It didn't SMELL like oxygen...

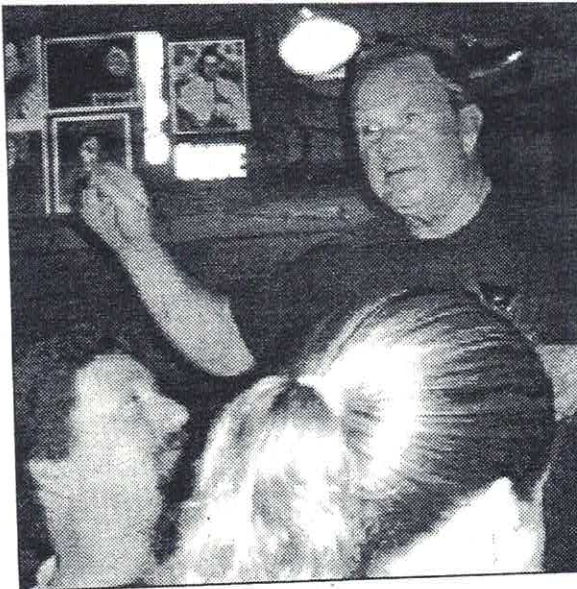
When I awoke, I was in recovery. Ann was there and also my nurse, Sholla, a sweet young woman from Nigeria. I kept asking, "Should I get up now for a walk?" They laughed and suggested that I wake up first. Finally, they agreed. I took a couple of pain pills first, thinking that it would be miserable- twisting, sitting up, then standing. To my surprise the pain was brief and I hopped right up. Whoa, whoa, I was told. Are you dizzy? I decided that if it was no worse than that, I would avoid narcotics and stick with Tylenol and Ibuprofen. I had a wonderful supper of jello and more

response and I didn't even realize they were just "jiving" out there. I wasn't pleased. I called for the nurse to reconnect my calf wraps and told her I thought that the loud talk was "inappropriate." She left, closing the door, I seethed... suddenly realizing my hiccups were gone. I smiled, rolled to my side, and rested comfortably. After about an hour I had to drink- my mouth felt like a cardboard box. But I had this terrible feeling- if I have one sip, my hiccups will return. Indeed they did. I remembered reading about a man who had hiccups for 28 years. I thought "surely that will be me." I took a sleeping pill and I slept for four hours (as far as I know without hiccups).

At 4 p.m. they returned. I got up to walk more. Ann returned a little later to find me in the hall walking, hiccuping. Cheery nurses, fresh in the morning. "Have you tried holding your breath?"

A delightful breakfast of jello and clear liquids. No thanks. "Drink plenty of fluids." My belly already feels like a balloon, just what I need for my hiccups. In spite of myself, my spells of hiccups began to stop, at least for periods of time. Discussions about discharge. "You have quite a bit of drainage." I wonder why. All of us men with our urine bags were walking in the hall, one trying to look more machismo than the next- standing straighter, walking faster (me hiccuping). At our group "discharge instructions" meeting, men with urine bags and wives looking anxious, we watched the slide show explaining what to do, not to do, how to work our tubing, day bag, night bag, etc. Then a slide appeared showing two kinds of fruit, a grapefruit and a cantaloupe. "Your scrotum may swell this much (grapefruit) or occasionally this much (cantaloupe). This is a normal part of the healing process." Men with wide eyes thinking. "Oh my god, I'll need two assistants to walk." I'm pleased to report that I can walk unassisted- day five. In spite of my excess drainage and disinclination to drink, I was discharged the day after surgery to our apartment.

To be continued



LaFarge School Board to discuss investments, bleachers, co-op

The regular school board meeting of the School District of LaFarge will meet at 7 p.m. on Feb. 19, 2007, in the high school library.

Agenda items:

- Choice of treasurer
- Investment policy
- Bleacher improvements
- Appointments to Kickapoo Reserve Board
- Co-op programs with Youth Initiative High School

- Changes board policy
- CESA representative, 2007-08 revenue control
- Motion to commission to discuss childhood tea 2007; improvementary teacher and parental consent.

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Viola News
Feb. 21, 1957

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Viola News
Feb. 18, 1982

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5. 1930, he married Audrey Williams at Winona, Minn. They lived and farmed in the area known as Camp Creek until they moved to Viola in 1962. Byron enjoyed fishing and hunting. He especially enjoyed hunting morel mushrooms and kept several of his friends well supplied. In August of 2005, Byron and Audrey moved to Vernon Manor and celebrated their 75th wedding

Foley, Ala., and Joe (Shirley) of LaFarge; one daughter, Catherine (Gene) Harris of Viola; 12 grandchildren; 24 great-grandchildren; four step-great-grandchildren; seven great-great-grandchildren; one brother, Robert (Jessie) Kinsey; one sister-in-law, Ione Williams; and nieces and nephews.

He was preceded in death by his

Epitaph-News- LaFarge, Viola and Readstown, Wis. ~ Feb. 22, 2007

sister-in-law, George Williams, and husband Arthur; two grandchildren; one great-grandchild; and nieces and nephews.

A memorial service will be held at a later date.

The Vossseteig Funeral Home's Henthorn Memorial Center of Viola is serving the family.

Blessed be the memory of Byron Elmer Kinsey.

LaFarge's Dr. DeLine returns From the Other Side Part VI

Even though my hospital stay was short, I was SO glad to get out! Back and forth I walked in that apartment, urine bag property attached (usually), I felt like one of those polar bears in the zoo. I was so excited to eat a little soft food, Ann had to watch me closely "Now take your time, just a little..." My hiccups receded gradually that day. At 48 hours postop I felt so good! I started to think about the treadmill downstairs it was quite cold and snowy, not very amenable to walking outside. Enjoying some food, not too much pain. Then the gas began. By that evening I wasn't looking so chipper and definitely not thinking about any treadmill! That lasted 12 hours or so, then slowly resolved as normal bowel function started to return.

Ann had homemade soups from home, baked fresh bread (!): so many special efforts to make our little place homey. Lots of sit-down activities like books, puzzles, stamps, videos. Problem was I couldn't (and still can't!) sit too well. But with my polar bear pacing and creative postures, all the while repositioning the catheter (ouch! eek!), we got along and the days slowly passed by. Myra got out of school for a quick flight to Detroit. It was a nice treat in the middle of our stay. She brought the kids game "Operation" to play. We made an attempt to get out of the apartment to Barnes and Noble's at the Wayne State University about a mile from the apartment; we took the car. But I wasn't much company, rather miserable, forgot some of my leg bag attachments (OUCH, EEK!). She returned Saturday morning to her studies. Just two more days till catheter out!

As before, Ann seemed always to notice other's needs in addition to mine. One morning she heard one of the cleaning ladies talking to a co-

worker. She had missed her breakfast that morning, was drinking coffee and feeling rather sick and miserable. Ann returned to the apartment, fixed up

some scrambled eggs and cheese and English muffins, and brought the

Continued on page 7

"Excuses Why People Don't Come to Church"

"It is not safe with all the cold, snow & ice"

Excuse # 583

I thought Kickapooians were supposed to be tough even when it comes to winter. Especially this time of the year everyone just wants winter to be over. Don't you know there are more dangerous places on Sunday morning than church in this weather?

I see people every day going to work, going shopping or just driving downtown in the worst snowstorms just to see who's there or if they can make it. If we have to work in 30 below weather we freeze and complain, but we go anyway. Why? Because we are earning a wage. Did you know the Bible says in Romans 6:23 we also earn a wage.

"When people sin, they earn what sin pays ~ death.

But God gives us a free gift ~ life forever in Christ Jesus our Lord."

We're all friends, can I be honest with you? Just coming to church will not make you right with God or get you to Heaven. It is coming to Jesus Christ and making Him Lord & Savior that will get you to Heaven. If you've truly have made this decision then you will want to come to church to be with other believers. You will want to come to church no matter what the weather is in order to worship Him.

Pray this prayer right now wherever you're reading this:

"Heavenly Father & Lord Jesus, I have been earning the wages of death by living my life against your ways. Right now I want to change that though. I ask for your forgiveness. I ask you Lord Jesus into my heart & believe that you are Lord above all things. I believe in my heart & speak with my lips that you died for me and paid the price to rescue me with your blood on the cross. Today Lord I am accepting your free gift & committing my life to you in exchange for eternal life and to be a servant in Christ. Amen."

If you just prayed this prayer and you want a different way of life then call me so we can talk more about your decision. The alternative forecast is "Hotter Than Hell." I'll see you this Sunday in our climate controlled church.

LaFarge Free Methodist Church
Pastor Mark Phillips
214 S. Cherry Street
Phone: 625-4197 or 625-6242

...ation, peer education, and community service projects.

Submitted by Mary Johnson,
LaFarge FCCLA Adviser and
Family & Consumer Educator

e sees large turnout

all who came in.

Volunteer workers were Beverly Wallace, Karen Liebetrau, Donna Smith, and Elizabeth Roberts. They are good, loyal volunteers and the Red Cross charge nurse said they did an excellent job. They always do.

Dorothy Pederson
Local Coordinator

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LaFarge FCCLA STAR participants were, from left to right, front row, Brittany Walker, Ashley Campbell, Rachel Gudgeon. Back row, Rose Teague, Miranda Parker, Dakota Clermont, and Rebecca Schlicht. (Contributed photo)

Be a life long or short, its completeness depends on what it was lived for.

—David Starr Jordan

Dr. DeLine Continued from page 12

breakfast for the lady to enjoy. On another day she heard one of the other patient's wife mentioning that the kids had forgotten to pick up bread at the store. Ann was planning on making some bread ("free form" due to lack of pans) and made an extra loaf and brought it to our neighbors. It's no wonder we were treated so well there!

Finally Monday came. My doctor was away at Mayo Clinic. Our PA also wasn't available. We met though with the urology nurse. First they did a cystogram to check for any leakage at the site where the bladder is sewn back to the urethra. "First we pour all this contrast into your bladder to make it nice and full..." "Oh, you're from Wisconsin, what part? We traveled there once..." Just take the pictures, lady, before my bladder bursts! No leakage. Lots of questions. Then the part I was waiting for- anxiously, but a little fearfully- catheter out. Miserable but brief. To my great surprise, I had immediate bladder control!

That was Monday. Winter storm warning- 7 a.m. Tuesday until 7 a.m. Wednesday. We weren't going to leave Monday in case of problems after the catheter is out. We anticipated waiting until Wednesday. But Tuesday a.m., no snow. We decided to quickly pack and start home, anticipating stopping along the way if the snow got too heavy. We got all the way across southern Michigan before the snow started. Then it was a long haul across northern Indiana and past Chicago. I wasn't able to drive, so Ann did it all. After about 10 hours of that (the last five hours in heavy snow), Ann wanted to stop (between Rockford and Chicago). I was getting itchy to get home. "I can drive, honey; you just relax and let me drive for awhile." "No, no, no!" In spite of my logical negotiating and reasoning, she wasn't going to agree! It was getting dark, cars off the expressway here and there... For a change, I actually lis-

tened and didn't argue. Once we got checked in at the motel, watching the blowing snow outside, I was SO sore from all that sitting. "Well, I guess you were right." The next morning the roads were better, we were rested, and we were home by Wednesday noon. There were multiple semis off the road between Rockford and Madison.

So good to be home, out for walks. At first I thought my return date of Monday, Feb. 26, was too slow. Gee, I'm feeling pretty good. But then the reality of the up days and down days of recovery became evident. Now I'm thinking the return date is about right! Hopefully I can sit better by then!

Well, I hope you have enjoyed my Notes From the Other Side! I've enjoyed writing them. I have so much to be thankful for. The good care and gentle people of Detroit and Henry Ford Hospital; the support of Kyle Bakkum and staff at Vernon Memorial; Dr. Rotert, Dr. Agar, Kelly Scheder, Lisa Varnes-Epstein, Marcia Bader, and the clinic team holding down the fort; all the good wishes and prayers of patients and community; and my wonderful kids and out of town family who have been so supportive and concerned. And especially my dear wife who has worked so hard to assist me through this challenging time, making such efforts to keep me comfortable and safe from myself.

Fondly,

Dr. Jim DeLine, LaFarge, Wis.

NEWSPAPER MULCH